BOSS & News

A Newsletter of the Breast and Ovarian Surveillance Service

Spring 2000

Johns Hopkins Breast Center Seeks Volunteers for Breast Cancer Prevention Study

Jennifer Bucholtz, MS, CRNP, OCN Nurse Practitioner, Johns Hopkins Breast Center



he Johns Hopkins Breast Center seeks postmenopausal women who are at an increased risk for breast cancer to volunteer for the STAR Trial. STAR, which stands for the Study of Tamoxifen and Raloxifene, is the second major breast cancer prevention study sponsored by the National Surgical Adjuvant Breast and Bowel Project (NSABP) and the National Cancer Institute (NCI). It is the first research study being done to compare tamoxifen, a drug proven to reduce the chance of developing breast cancer with raloxifene, another drug that holds promise for breast cancer prevention. The drug tamoxifen was proven in the first Breast Cancer Prevention Trial sponsored by the NSABP, to reduce breast cancer incidence by 49% in women at an increased risk for the disease compared to a placebo. In October 1998, the Food and Drug Administration (FDA) approved the use of tamoxifen for breast cancer risk reduction in women at an increased risk for the disease. Raloxifene has only been approved by the FDA for the prevention of osteoporosis.

To be eligible for the STAR Trial a woman need to be 35 years of age or older, postmenopausal and have an increased risk for breast cancer. An increased risk for breast cancer is determined by many factors including age, family history of the disease and personal medical history. For example, women who have a strong family history of breast cancer or have had a breast biopsy that has shown atypical hyperplasia or lobular carcinoma in situ (LCIS), are at an increased risk. The trial is limited to postmenopausal women because raloxifene has not been adequately safely tested in premenopausal women. Only a few medicines or medical diagno-

ses make a woman ineligible.

Any woman contacting Johns Hopkins regarding the STAR trial will receive a free risk assessment of her breast cancer risk and a written risk profile showing the potential benefits and risks of the drugs given. A free consultation appointment to learn the details about the Trial can be scheduled at Johns Hopkins Breast Center in Baltimore or at Johns Hopkins Greenspring Station in Lutherville.

Women who are eligible for the Trial will receive the study drug free for five years, the time period for taking the drug. Entry and follow-up examinations include a yearly mammogram, twice a year clinical breast exam, routine yearly bloodwork and a yearly pelvic exam. These routine tests and exams can be done at Johns Hopkins or through a woman's current medical care provider.

To date, over 3000 women from the U.S. and Canada have entered the STAR Trial since its start in July 1999. A total of 22,000 women are sought for participation over the next several years. Women of all races and ethnic groups are encouraged to participate.

Dr. Kathy Helzlsouer is the Primary Investigator for the STAR Trial at the Johns Hopkins Breast Center. Other participating centers with Johns Hopkins are Anne Arundel Medical Center, Crozer Chester Medical Center in Upland, Pennslvania, Central PA Hematology and Medical Oncology Associates in Upland, PA and the John Marsh Cancer Center in Hagerstown, MD.

Please contact Jennifer Bucholtz, Nurse Practitioner at 410-614-STAR (410-614-7827) for more information.

Join the Mid-Atlantic Cancer Genetics Network!

he Mid-Atlantic Cancer Genetics Network (MACGN) has been established at the Johns Hopkins University. In the fall of 1998, the National Cancer Institute (NCI) launched a major research initiative to create a national network of centers that specialize in the study of the genetic susceptibility to cancer. NCI awarded grants to eight institutions, including Hopkins, to establish this network, named the Cancer Genetics Network (CGN). The network will serve as a major national resource to promote cancer genetics research, translate research findings into medical practice, and address the associated psychosocial, ethical, legal, and public health issues.

CGN builds on the recent identification of genes linked to inherited cancers and will help researchers answer the many clinical questions related to the hereditary susceptibility to cancer. Issues to be explored include: the prevalence of inherited mutations of familial cancer genes in different populations, determinants of cancer development in individuals with inherited genetic mutations, environmental exposures that interact with genes to cause cancer, and the translation of findings into cancer prevention strategies.

What CGN Means for Patients and the General Public

CGN may be the largest collaboration dedicated to the study of cancer genetics. The network invites people at increased risk of cancer due to personal or family history to join a registry, or list, of potential study participants. Registry members are updated on recent developments in cancer genetics and notified of special research studies for which they may

be eligible. Members' information will be kept confidential and safeguarded by the latest informatics technology.

What CGN Means for Health Care Professionals

Working with health care professionals from across the mid-Atlantic region, MACGN provides referrals to cancer specialists, including those who provide genetic counseling and testing. MACGN facilitates the exchange of cancer genetics information and research resources through public and professional education via a web site, quarterly newsletter, speakers' bureau, and continuing medical education.

What CGN Means for Researchers

When studies are initiated, a pool of interested individuals from the registry can be readily invited to participate. This approach will speed the research process, and the pooling of volunteers from the eight network centers will make it possible to have enough study participants to answer important questions definitively. CGN also supports pilot studies in cancer genetics and fosters collaborative research among the participating centers and with researchers outside the network. Funding has been set aside by the NCI for CGN pilot projects. Investigators at each of the CGN sites, including Johns Hopkins, can apply for this funding for collaborative projects in cancer genetics. For more information about Pilot Project funding, contact MACGN at 410-614-6334 or toll free 1-877-880-6188.

To join or to find out more about MACGN, please call Estella B. Chen, PhD, Program Coordinator, at 410 614-6334 or toll free 1-877-880-6188. Visit MACGN on the Internet at http://www.macgn.org. \$\mathbb{A}\$

New Studies at the Johns Hopkins Breast Center

Evaluation of Breast Pumps for Early Breast Cancer Screening

The Johns Hopkins Breast Center is participating in an international study that is evaluating two new breast pump devices. These devices, similar to those used by breast feeding-women, are being used to devise a PAP smear approach to screen for breast cancer. Recent studies have shown that when gentle suction is applied many women will have a few drops of fluid appear on the nipple. This fluid can be analyzed, similar to a PAP smear to detect early breast cancer. There is much hope that these new devices will be able to identify breast cancer and pre-cancerous conditions earlier than can be seen with mammography.

Women eligible for this study need to be at an increased risk for breast cancer due to family history and personal health history factors. Dr. William Dooley is the Primary Investigator. To learn more about this study, please contact the Johns Hopkins Breast Center at 410-955-4851.



DNA Repair and Breast and Ovarian Cancer Risk

Dr. Kathy Helzlsouer is conducting a study at Johns Hopkins to learn more about factors that may be involved in the risks for breast and ovarian cancer. This study involves answering a questionnaire and having a blood sample collected at Johns Hopkins. This study hopes to find out more about environmental and inherited causes of breast cancer.

Women eligible for this study need to have a family history of breast or ovarian cancer or personal history of a breast biopsy. To learn more about this study, please call Helen Perry at 410-614-1112. #

Study on Breast Cancer and Genetic Testing

The National Institutes of Health (NIH) is sponsoring a study to find out the best way to educate women about the risks and benefits associated with genetic screening for breast and ovarian cancer. Premenopausal women who live in Maryland, Washington, DC or Northern Virginia and have a sister, mother or daughter with breast cancer are eligible to participate in this study. All participants will receive information concerning breast and ovarian cancer and genetic screening information for these diseases. Participation involves a personal interview and completing two questionnaires. All information is kept strictly confidential. Genetic testing is not provided. Eligible women will receive \$50.00. The Johns Hopkins University and Research Triangle Institute are conducting the study. To learn more about this study, please call: In Baltimore: 410-817-5088 or 1-800-334-8571 ext 2492 (Monday-Friday, 8:30am-4:30pm)

In Baltimore: 410-817-5088 or 1-800-334-8571 ext 2492 (Monday-Friday, 8:30am-4:30pm) 202-728-2492 (nights and weekends)

In Washington, D.C. and Northern Virginia: 202-728-2056



Breast and Ovarian Surveillance Service 601 N. Caroline Street Baltimore, MD 21287



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